

PATENT APPLICATION  
Mo-7206  
P59A

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICATION OF	) RESPONSE UNDER 37 CFR 1.116
JOHN E. LITZ ET AL	) EXPEDITED PROCEDURE
SERIAL NUMBER: 09/851,920	) EXAMINING GROUP NO.: 1754
FILED: MAY 9, 2001	) EXAMINER: STEVEN J. BOS
TITLE: AUTOCLAVE CONTROL	) RESPONSE TO PAPER # 01292004
MECHANISMS FOR PRESSURE	)
OXIDATION OF MOLYBDENITE	)

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(A)**

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sirs:

Applicants, by the undersigned attorney, respectfully petition the Commissioner of Patents under the provisions of 37 CFR 1.136(a) to extend the time for filing their response so that the Amendment filed simultaneously with this Petition will be considered timely filed.

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

James M. Franks, Reg. No. 42,552

Type or print name of person signing certification


Signature

July 6, 2004

Date

Please charge the fee for response within the two month, \$420.00, to Deposit Account Number 13-3848. This paper is also authorization to charge any insufficiency of fees due with this filing to Deposit Account Number 13-3848. Triplicate copies of this paper are attached.

Respectfully submitted,

By   
James R. Franks  
Agent for Applicants  
Reg. No. 42,552

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# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

0985/970

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	14	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	14 minus 20 = *	
INDEPENDENT CLAIMS	2 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	11	20	=
Independent	1	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total and Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	